

## Enter your transmittal number

Transmittal Number

Your unique Transmittal Number can be accessed online: <a href="http://mass.gov/dep/service/online/trasmfrm.shtml">http://mass.gov/dep/service/online/trasmfrm.shtml</a> or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes). →

Massachusetts Department of Environmental Protection

A. Permit Information

## Transmittal Form for Permit Application and Payment

- 1. Please type or print. A separate Transmittal Form

Transmittal Form		BWP IW 38		Indus	Industrial Wastewater			
must be completed		1. Permit Code: 7 or 8 character code from permit instructions			2. Name of Permit Category			
for each permit		Industrial Sewer Use						
application.		3. Type of Project or Activity				······································		
2. Make you	ır							
check payab		B. Applicant Informa	tion - Firm or Individ	lual				
the Commor	wealth	b. Applicant illionna		iuai				
of Massachu		Ocean Spray Cranberries, Inc.						
and mail it w		1. Name of Firm - Or, if party	needing this approval is an indiv	idual enter r	name below:			
copy of this f			,,		iaino dolotti.			
4062, Boston, MA		Last Name of Individual 3. First Name of Individual				4 14		
02211.		152 Bridge Street	0.1	o. The Hame of Highland			4. MI	
<b>*</b>		5. Street Address						
<ol><li>Three cop</li></ol>	ies of	Middleboro	ma	000	10	E00 040 E000		
this form will	be	6. City/Town	<u>ma</u> 7. Sta	0234		508-946-5896	<u> </u>	
needed.		Patricia Gallagher	7. Sta	•	Code	,9. Telephone #	10. Ext. #	
Copy 1 - the		11. Contact Person		pgalla	gner@ocea	anspray.com		
original mus		11. Contact Person		12. e-m	ail address (o	ptional)		
accompany y	our -							
permit applica	ation. 🕻	C. Facility, Site or Ind	lividual Requiring Ar	proval				
Copy 2 must								
accompany y	our	Ocean Spray Industrial	Pretreatment Facility					
fee payment. <b>Copy 3</b> shoul	مط المم	1. Name of Facility, Site Or In	ndividual			•		
retained for y		112 Wood Street						
records	Oui	Street Address						
		Middleboro	MA	0234	ŀ6	508-946-5896		
<ol><li>Both fee-paying</li></ol>		3. City/Town	4. Stat	e 5. Zip	Code 42	6. Telephone #	7. Ext. #	
and exempt					·	•		
applicants must mail a copy of this		<ol><li>DEP Facility Number (if Kn</li></ol>	own) 9. Fed	eral I.D. Nur	nber (if Knowr	n) 10. BWSC Track	ing # (if Known)	
transmittai for	m to —						- ` ,	
ti di lorritta i lor		). Application Prepar	ed by (if different fro	m Secti	on B)*			
MassDEP				0001	011 5)			
P.O. Box 4	1062							
Boston, M	Α	1. Name of Firm Or Individual					' <del>'</del>	
02211		7 <del></del>				•		
		2. Address						
* Note:								
ILLEDI BWSC Pe	rmits Z	3. City/Town	4. Stat	e <u>5. Zip</u>	Code	6. Telephone #	7. Ext. #	
enter the LSP	. "``_	and the state of t				or releptions :	1. ΕΛ. π	
<b> &gt; </b>   8	၂ ဗ္ဂ	8. Contact Person		9 I SP N	lumber (RWS)	? Permite only\		
7	, E	8. Contact Person 9. LSP Number (BWSC Permits only)						
enter the LSP		Permit - Project Co	ordination					
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	<b>1</b>	Is this project subject to Mi	EPA review? ☐ yes ☒ no			1881011	1270	
S A	SOUTH	If yes, enter the project's F	OEA file number - assigned	uban an		1.63	18.80	
	ĮŌ	Environmental Notification	Form is submitted to the ME	Milenan		- 15° 15		
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		A			EOEA File	Number	-0,0 <u> </u>	
	Г,	Amount Due			•			
DEP Use Only	/ C.	a Conict Ducations				17 1/2	44. B	
000 Om		pecial Provisions:				100 100	\$\$\$\$\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Permit No:	1.	☐ Fee Exempt (city, town or r	nunicipal housing authority)(state	agency if fe	e is \$100 or l	ess). \්ලී		
r citin 140.	9	i nere are no tee exemptions i	Of BWSC permits, regardless of	annlicant etc	stuc	1500	Y ////	
Pan'd Data	2. 3.	Alternative Schodule Profe	nt extensions according to 310 C	MR 4.04(3)(	c).	- Commo		
Rec'd Date:	3. 4.	Homeowner (according to	ct (according to 310 CMR 4.05 at	nd 4.10).		10000	100 Standard	
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Reviewer:		101.001	\$ 1100000			12/4/07		
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